

# CITY/COUNTY ALCOHOL AND DRUG PROGRAMS PROCEDURE

## TB Screening

**Purpose:** TB is a communicable disease that is spread through airborne droplets. CCADP provides residential services to clients at risk of communicable diseases; therefore, TB screenings must be conducted in order to identify clients who may be infectious. CCADP's policy is that all clients entering residential services are screened for symptoms of active TB within 24 hours of admission.

1. Client presents to complete intake paperwork.
2. TB Screening form is obtained from client chart.
3. Staff starts by asking client the first bolded question.
4. If client answers "no" to questionnaire and is screened to not be at risk for symptoms of active TB, form is filed in chart under the police report.
5. If the client answers "yes" to any of the bolded questions, staff must then ask the client the non-bolded questions. The non-bolded questions solicit information that may explain the reason for the "yes" response to the bolded question.
6. At the end of the questionnaire, if the client has answered "yes" to any of the bolded questions and they can't be explained as part of a medical issue with symptoms lasting **greater than 2-3 weeks**, then the client must be sent to a medial facility to obtain medical clearance.
7. Client will be provided with a particulate mask and is required to wear the mask at all times unless directed differently by a physician.
8. Staff will then complete a medical referral form and attach a copy of client's TB screening tool.
9. Client will then be transported to an appropriate emergency room/medical facility.
10. Staff will provide the medical referral form/TB screening tool to physician/facility client is transported to in order to provide explanation of referral.
11. Staff will return to facility and document the medical referral in client chart and in computer program designated for positive symptoms of active TB.
12. TB Screening tool will then be filed in client's chart behind the police report.

13. If physician/medical facility confirms active TB, client will not be allowed to return to the facility.
14. If physician/medical facility confirms through documentation that client is negative for active TB, client may return to the facility.
15. Medical documentation is filed in client's chart and client's name is removed from the computer program designated for positive symptoms of active TB.

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